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Bib Data Sheet

CONFIRMATION NO. 2885

SERIAL NUMBER 10/040,810	FILING DATE 01/07/2002 RULE	CLASS 382	GROUP ART UNIT 2621	ATTORNEY DOCKET NO. D/A1090 XER 2 0430
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 02/06/2002

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY NY	SHEETS DRAWING 6	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 3
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**ADDRESS**

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**TITLE**

Parallel non-iterative method of determining and correcting image skew

<b>FILING FEE RECEIVED</b> 758	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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